

SEPTEMBER 25 – 27, 2016
PALM SPRINGS, CALIFORNIA
PALM SPRINGS CONVENTION CENTER



OFFICIAL HOTEL RESERVATION FORM

Reservation Deadline: September 7, 2016

CONTACT INFORMATION

First Name:	Last Name:		
Address:			
City:	State:	Zip:	Country:
Phone:	Fax:		
Email (required to receive confirmation):			

HOTEL SELECTION

Review hotels below and indicate your hotel choices in order of preference. Requests will be honored on a first-come, first-served, space-available basis. Submit your request as soon as possible for the best opportunity of receiving your hotel choice.

Preference	HOTELS	Single	Double	Triple	Quad	Tax Rate
	Renaissance Palm Springs – Host Hotel (Minimum two-night stay)	\$165	\$165			16.6%
	Hilton Palm Springs	\$155	\$155	\$175	\$175	16.8%
	Courtyard Palm Springs	\$149	\$149	N/A	N/A	16.5%

ROOM INFORMATION: Arrival Date: _____ Departure Date: _____

ROOM TYPE Single (1 bed/1 person) Double (1 bed/2 persons) Double (2 beds/2 persons)
 Triple (2 beds/3 persons) Quad (2 beds/4 persons)

List names of all room occupants: 1. _____ 2. _____
3. _____ 4. _____

Check here if you have a disability requiring special services Non-Smoking Smoking

Special Requests: _____

IMPORTANT INFORMATION

DEPOSIT: All reservation requests must be accompanied by a credit card guarantee or check in the amount equaling a deposit for one night's room and tax for each room reserved. Forms received without a valid guarantee/deposit will not be processed.

Your hotel reserves the right to charge this card a deposit for one night's room and tax for each room reservation on or after **September 7, 2016**. This credit card must be valid through September 2016.

Amex MasterCard Visa Discover Check payable to Orchid Event Solutions Check # _____

Card #: _____ Exp. Date: _____

Name: _____ Signature: _____

CANCELLATION: Cancellations after **September 7, 2016** and prior to 24 hours before arrival date will be subject to a \$25 processing fee. One night's room and tax will be forfeited entirely if cancellation occurs within 24 hours of arrival date.

If you don't receive a confirmation or have questions, please contact Orchid Event Solutions.

Return completed form to Orchid Event Solutions:

Mail:
175 S. West Temple, Suite 30

Email: help@orchideventsolutions.com

(800) 989-4006 US Toll-free
(801) 214-7277 International

Salt Lake City, UT 84101

Fax: 801-355-0250

7:00 am – 6:00 pm MST, Mon–Fri